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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

V07403

(1)

1031 MO SUITE 20	Country 25 9. Name and Address of Currents CREORD, WILLIAM P JR. COUNTRY 25 PRESE BLVD	Mailing Address 5125 ADANSON STI #400 ORLANDO FL 32804 US 28. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 11 Registered Agent	Cou 30	intry 81 Name	3. Date Incorporated or Qualified 12/20/1991 4. FEI Number 59-3105904 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for i Florida Statutes Yes 10. Name and Address of New R	3a. Date of t 05/0 \$:intangible tax un	ast Report 1/1995 Applied For Not Applicable 8.75 Additional Fee Required 65.00 May Be Added to Fees der s 199.032,
2. Principal Place 2. Principal Place 21 Suite, Apt. #, 22 City & State 23 Zip 24 WEATHE 1031 MO SUITE 20	Country 25 9. Name and Address of Currer RFORD, WILLIAM P JR. DRSE BLVD	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29	Cou 30		12/20/1991 4. FEI Number 59-3105904 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for i	05/0	Applied For Not Applicable 8.75 Additional Fee Required 65.00 May Be Added to Fees der s 199.032,
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Suite, Apt. #, 22 City & State 23 Zip WEATHE 1031 MO SUITE 20	25 9. Name and Address of Currer RFORD, WILLIAM P JR. DRSE BLVD	26 Suite, Apt. #, etc. 27 City & State 28 Zip 29	30		5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for in Florida Statutes	intangible tax un	Not Applicable 8.75 Additional Fee Required 65.00 May Be Added to Fees der s 199.032,
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Zip Zip WEATHE 1031 MO SUITE 20	9. Name and Address of Currer RFORD, WILLIAM P JR. DRSE BLVD	2θ	30		Trust Fund Contribution 8. This corporation has liability for in Florida Statutes Yes	intangible tax un	65.00 May Be Added to Fees der s 199.032,
Zip 24 WEATHE 1031 MO SUITE 20	9. Name and Address of Currer RFORD, WILLIAM P JR. DRSE BLVD	Zip [29]	30		Trust Fund Contribution 8. This corporation has liability for in Florida Statutes Yes	intangible tax un	Added to Fees der s. 199.032,
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WEATHE 1031 MO SUITE 20	9. Name and Address of Current RFORD, WILLIAM P JR. DRSE BLVD			81 Name	Florida Statutes 🔲 Yes	□ No	
1031 MO SUITE 20	ERFORD, WILLIAM P JR. DRSE BLVD DO	nt Hegistered Agent		81 Name	10. Name and Address of New R	egistered Ager	
1031 MO SUITE 20	ORSE BLVD 00			Name 18			nt
1031 MO SUITE 20	ORSE BLVD 00		ļ				-
SUITE 20	00			82 Street Addr	ress (P.O. Box Number is Not Acceptable	le)	
				83			
WHILE	FAUN FL 32/09			63			
	WHITER FARR FL 32/09			84 City		— 85	Zip Code
11. Pursuant to	the provisions of Sections 607 0502	and 607 1508 Florida Step	too the obs		ration submits this statement for the purp	ᅡᆫ	'
or registered familiar with, SIGNATURE	d agent, or both, in the State of Flora , and accept the obligations of Secti ,	(4) Such change was authori, on 607 0505, Florida Statute	zed by the c s	orporation's boar	ration submits this statement for the purp rd of directors. I hereby accept the appo	pose of changing pintment as regis) its registered office tered agent. Lam
SIGNATORE	grafine Typed or pented name of registers traject	and Median regalish (Na	Off Biopsteres	Agrint signature require	: When remetable		
12.	OFFICERS AND) DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRE	CTORS IN 12
TITLE	D	DELETE	1 1 10	T. E		☐ Cha	
NAME	LOVELACE, G. WINSTON		1.2 NAI	ME		-	
SCAPOCA TEERTS	83 INTERLAKEN ROAD		1357	REET ADDRESS			
CITY - ST - ZIP	ORLANDO FL		1 4 CIT	Y-SI-ZIF			
TITLE		DEFETE	2 1 707	LE		☐ Cha	nge 🔲 Addition
NAME			2.2 NA	ME			_
STREET ADDRESS			23 STR	KEEL ADDRESS			
DITY-ST-ZIP TITLE		DELETE		Y - ST - ZIP			
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ITLE		DELETE	€ 1 TITE			☐ Cnar	ige Addition
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TREET ADORESS			63 STAE	ET ADDRESS			}
TY-ST-ZIP			6.4 CITY	- ST-7-P	r the exemption stated in Section 119.07		

4. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: __

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4/30/96 (407)740-5001